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A Note From NIDA's Director

In this issue of *Science & Practice Perspectives*, a dialogue between researcher Dr. Linda Chang and clinical psychiatrist Dr. Paul Linde provides a prime example of how bringing together a researcher's conceptual framework and a skillful clinician's understanding of clinical nuance stimulates and enriches both. Together, Chang and Linde consider whether the results to date from non-invasive brain imaging studies might support his use of certain medications with methamphetamine abusers. Ultimately, they conclude that the findings appear consistent with Linde's use of some of the medications, raise concerns about others, and can't strictly endorse any. Along the way, the colloquy identifies two good opportunities for research studies and appropriate messages to give patients based on imaging studies.

If Chang and Linde's discussion exemplifies the depth of integration now occurring between research and clinical practice in drug abuse, the overall contents of the journal indicate its breadth. Topics range from clinical interventions to the challenges of making organizational changes and of laying a foundation for systemic change. The research-practice engagement evident in *Perspectives* reflects a broad maturity of collaborative solution-seeking in the treatment of drug abuse. To cite some examples:

- NIDA's Clinical Trials Network has now published the results of studies of motivational interviewing, contingency management, and opiate detoxification with the medication combination of buprenorphine and naloxone. Although these studies proved their hypotheses, an equally important outcome was that researchers and community clinicians jointly planned and accomplished projects that served both of their learning agendas.
- The Blending Initiative—a collaboration between NIDA, the Substance Abuse and Mental Health Services Administration, and the Addiction Treatment Technology Centers—has released four evidence-based, validated tools for staff training. They cover the use of buprenorphine for opiate withdrawal and for longer term treatment, and offer guidance on administering and interpreting the Addiction Severity Index.

There always will be some degree of divergence between research and clinical practice in the treatment of substance abuse, because the two enterprises have different natures. Communication across this gap is critical to achieve the common goal of reducing drug abuse and addiction, and